

File with:
Iowa Ethics and Campaign
Disclosure Board
510 E. 12th, Ste. 1A
Des Moines, Iowa 50319
Fax: 515-281-4073

Reset Form

FOR INSTRUCTIONS, SEE BACK OF FORM
DISCLOSURE SUMMARY PAGE

IA ETHICS AND
CAMPAIGN DISCLOSURE
2008 SEP -2 PM 12:57

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Flora M. Lee

IMPORTANT: Indicate by # type of committee you are reporting for: 7

(1) Statewide/Legislative/Judge Standing for Retention Candidate (2) State PAC (3) State Party
(4) County Central Committee (5) County Candidate (6) City Candidate (7) School Board or Other Political
Subdivision Candidate (8) County PAC (9) City PAC (10) School Board or Other Political Subdivision PAC (11) Local Ballot Issue

CANDIDATE COMMITTEES ONLY:

Candidate Name

Flora M. Lee

Political Party (if applicable)

N/A

Office Sought

Director

District (if Senate or House)

N/A

FORM
DR-2

(Rev. 07/2007)

DISCLOSURE
REPORT

For Office Use Only

Comm. # _____
Logged In _____
Scanned _____
Computer _____
Audited _____

Late reports are subject to possible civil and criminal penalties. Pursuant to Iowa Code sections 68B.32A(7) and 68A.401(3), the candidate, for a

Rudy V. Lee Jr.

SIGNATURE OF PERSON FILING REPORT

712-255-0629

TELEPHONE

9/1/08

DATE SIGNED

I AM FILING A August 31, 2008 REPORT FOR (1) ELECTION (2) NON-ELECTION YEAR.
(report date) Indicate by # ☐

☐ CHECK IF AMENDMENT TO REPORT DATED _____

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a DR-3 is filed.)

Local Committees, enter Date of Election

September 9, 2008

County & Local Committees, enter County in
which Election is held

Woodbury

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (Total of all funds held by the committee. This amount MUST be the same as the cash on hand at the end of the last reporting period or must be zero if this is first report filed.)\$

0

ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) (**also see in-kind below)

867.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL.....\$

0

SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

307.09

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report balance must be zero)\$

559.91

**UNPAID BILLS (From Schedule D - Attach Schedule D)

0

**IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

10.00

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

0

CONSULTANT BREAKDOWN (Schedule G Attached?)

YES ☒ NO

CANDIDATE COMMITTEES ONLY:

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

0

STATE COMMITTEES: Submit a reconciled campaign account bank statement in January of each year.

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN
(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Flora M. Lee

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND-RAISER INCOME
7/31/08	ID# CK#	UNITEMIZED Contributions	N/A	\$ 20.00	<input type="checkbox"/>
8/2/08	ID# CK#	MARK AND Valorie KRUSE 12504 S. Cypress St. Sioux City, Ia 51106	N/A	50.00	<input type="checkbox"/>
8/3/08	ID# CK#	Judy Stewart 1763 Millwood Way Suffolk, Virginia 23434	N/A	25.00	<input type="checkbox"/>
8/3/08	ID# CK#	Cheryl Swolley 5309 Hwy 75 N Sioux City, Iowa 51108	N/A	20.00	<input type="checkbox"/>
8/3/08	ID# CK#	Stephanie Hokanson 3448 Glen Oaks Blvd. Sioux City, Ia 51104	N/A	20.00	<input type="checkbox"/>
8/5/08	ID# CK#	Richard E. Hayes 2553 Cassel Place Sioux City, Iowa 51103	N/A	50.00	<input type="checkbox"/>
8/5/08	ID# CK#	Jackie Warnstadt 4623 Central Ave Sioux City, Iowa 51108	N/A	50.00	<input type="checkbox"/>
8/5/08	ID# CK#	AL Cole 1212 Olaf Court Sioux City, Iowa 51104	N/A	50.00	<input type="checkbox"/>
8/5/08	ID# CK#	Bette Stille 1400 S. ROYCE Sioux City, Ia 51106	N/A	20.00	<input type="checkbox"/>
8/13/08	ID# CK#	Issac Rayford 2627 S. Rustin Apt D23 Sioux City, IA 51106	N/A	25.00	<input type="checkbox"/>
SUB-TOTAL				\$ —	5/2 330.00
TOTAL (if last page of this schedule)				\$ —	

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 2
(for Schedule A)

For Instructions, See Back of Form

Reset Form

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
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COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Flora M. Lee

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
8/21/08	ID# CK#	Marlin Jeffers St. 18922 Grover OMAHA, NEBRASKA 68130		\$ 50.00	<input type="checkbox"/>
8/23/08	ID# CK#	JAMES WEIDERSPAN 927 - 28th St. Sioux City, IA 51104		170.00	<input type="checkbox"/>
8/23/08	ID# CK#	UNITEMIZED Contributions		20.00	<input type="checkbox"/>
8/23/08	ID# CK#	UNITEMIZED Contributions		20.00	<input type="checkbox"/>
8/24/08	ID# CK#	Soneri Brown P.O. Box 2519 DAKOTA CITY, NE 68731		25.00	<input type="checkbox"/>
8/28/08	ID# CK#	Lorenzo Chavis Pl. 3250 Pawnee Pl. Sioux City, IA 51104	SON-IN-LAW	202.00	<input type="checkbox"/>
8/28/08	ID# CK#	James Weiderspan 927 - 28th St. Sioux City, IA 51104		50.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 867.00

S/B 537.00

TOTAL (If last page of this schedule)

\$ 867.00

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

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EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Flora M. Lee

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
8/28/08	ID# CK# 1500	STAPLES 840 Gordon Dr SIOUX CITY, IA 51101	Printing of Postcards	\$307.09
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$307.09
TOTAL (If last page of this schedule)				\$307.09

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(I).)

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(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Committee To Elect Flora M. Lee

Reset Form

SCHEDULE

E

(Rev. 06/97)

IN-KIND

CONTRIBUTIONS

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (if applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
7/30/08	Flora M. Lee 1408 CASSELMAN ST. SIOUX CITY, IA 51103	CANDIDATE	Voter Registration CD	\$ 5.00	<input type="checkbox"/>
8/18/08	RUDY V. Lee, Jr 1408 Casselman St SIOUX City, IA 51103	SPOUSE	Voter Registration CD	\$ 5.00	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
SUB-TOTAL				\$ 10.00	
TOTAL (if last page of this schedule)				\$ 10.00	

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Page 1 of 1
(for Schedule E)